New College
THE HONORS COLLEGE of Florida

Petition for Preliminary Approval of Transfer Credit

To be eligible for transfer, a course must be:
- Completed at a regionally accredited college or university;
- Completed with a grade of "C" or higher (or the equivalent);
- Approved with the consent of the student's advisor and relevant faculty (if seeking credit to fulfill an AOC requirement).

Reminders: 1. *An undergraduate student at NCF may not earn more than 60 semester credits (15 units) from transfer course work.*

2. *Request an official transcript to be sent from the transfer institution to the NCF Office of the Registrar to receive transfer credit.*

Section I – To be completed by the student

Student Name (please print): _____   _____   **NCF ID#: N**_____

(Last)   *(First)*

Area of Concentration: _____   **Expected Grad. Year:** _____

Name of Institution/Location: _____   **Term Dates:** _____ - _____

(From)   (To)

Indicate transfer institution's credit system: _____ Semester credits   _____ Quarter credits   _____ Unit credits   _____ Other: _____

Transfer Course Number and Title *(ex., MATH 231 – Linear Algebra)*	**Number of Credits**	**NCF Preliminary Evaluation*****	**NCF Credit**** *(in units)*	**AOC*/LAC* Requirement Fulfilled** *(if applicable)*

*The student must submit a Petition to the Provost's Office for approval of LAC credit.

*A faculty member in the appropriate academic discipline must approve a course to fulfill an AOC requirement. Signature is required in the chart above.

**4 semester credits = 1.0 NCF unit; 3 semester credits = 0.75 NCF unit; 6 quarter credits = 1.0 NCF unit; 4.5 quarter credits = 0.75 NCF unit

***The preliminary evaluation and NCF credit will be indicated by the New College Office of the Registrar.

Student Name (please print): _____

Student Signature: _____ **Date:** _____

Section II – To be completed by the Faculty Advisor

Advisor Name (please print): _____

Advisor Signature: _____ **Date:** _____

Please review the information in the chart above. By signing, you are approving the student to enroll in the course(s) listed.
If appropriate, please indicate in the chart above if any course listed will fulfill a course requirement in the student's Area of Concentration (AOC) and what specific requirement it fulfills.

Section III – To be completed by the Office of the Registrar

Is the institution regionally accredited? _____Yes   _____ No

Is the student eligible to receive transfer credit *(has fewer than 60 semester credits/15 units of transfer credit)***?** _____ **Yes**   _____ **No**

Provost's Office approval for Liberal Arts Curriculum (LAC) credit transfer? _____ Yes   _____ No
(Must attach documentation for approval.)

Office of the Registrar Staff Member's Name (please print): _____

Office of the Registrar Staff Member's Signature: _____ **Date:** _____